

Pursuant to LSA-R.S. 49:76G(2)(a), an employer or principal of a lobbyist may elect to file the Lobbying Expenditure Reports as required by Title 49 on behalf of all of its lobbyists. The designation form is to be completed and submitted by January 31st of each year. This designation will be effective for the reporting of all expenditures made during that calendar year. This form must include a listing of all persons for whom you will be reporting. Also, please list a contact person who will be responsible for completing such reports and for receiving any correspondence regarding reporting deadlines and late fees. Failure to fully complete this form may render your designation ineffective.

Hand deliver or mail to: 2415 Quail Drive, 3rd Floor, Baton Rouge, LA 70808

OR

Fax to: (225) 763-8787 or (225) 763-8780

1. EMPLOYER/PRINCIPAL

Enzon Pharmaceuticals, Inc.

2. BUSINESS ADDRESS

685 Route 202/206 Bridgewater, NJ
Street and No. City State 08807 Zip

MAILING ADDRESS

685 Route 202/206 Bridgewater NJ 08807
Street and No. City State Zip

3. CONTACT PERSON:

Sandoval David I.
Last First MI

4. MAILING ADDRESS

685 Route 202/206 Bridgewater NJ
(If different from above) Street and No. City State 08807 Zip

5. PHONE NUMBER

908-541-8600
Area Code and Phone Number

6. FAX NUMBER

908-541-8838
Area Code and Fax Number

7. Names of Lobbyists who are employed by or who represent the interests of the Principal listed above:

1) Name:

Kreller Kelli
Last First MI

EXEC.ID.# _____

2) Name:

Last First MI

EXEC.ID.# _____

3) Name:

Last First MI

EXEC.ID.# _____

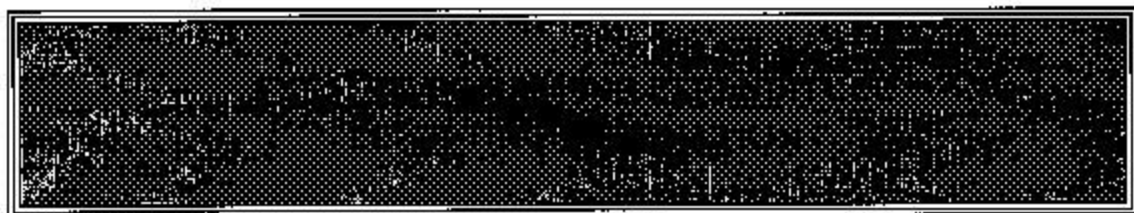
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4) Name: _____ EXEC.ID.# _____
Last First MI

5) Name: _____ EXEC.ID.# _____
Last First MI

6) Name: _____ EXEC.ID.# _____
Last First MI


7) Name: _____ EXEC.ID.# _____
Last First MI

8) Name: _____ EXEC.ID.# _____
Last First MI

9) Name: _____ EXEC.ID.# _____
Last First MI

10) Name: _____ EXEC.ID.# _____
Last First MI

Pursuant to LSA-R.S. 49:76G(2)(a), Enzon Pharmaceuticals, Inc.
Name of Employer or Principal
is exercising the option of filing expenditure reports for all executive lobbying expenditures
made on my/its behalf by persons representing my/its interests during the year of 2008.
I hereby certify that the information contained herein is true and correct to the best of my
knowledge, information and belief; and that no information required by LSA-R.S. 49:71 et
seq. has been deliberately omitted.


Signature of Employer/Principal or Representative

DAVID SANDOVAL
Print or Type Full Name